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APPLICATION NO.	FILING DATE	FIR	RST NAMED INVENT	OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/774,602	02/10/2004		Pierre Druilhe		248791US0DIV	1888	
TITLE OF INVENTION: P	LASMODIUM FALCIPARI	JM ANTIGENS IND	UCING PROTECT	IVE ANTIBODIES			
APPLN. TYPE	SMALL ENTITY	TITY ISSUE FEE		BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	03/13/2006	
EXAMINER		ART UNIT	CL	ASS-SUBCLASS			
MINNIFIELD, NITA M		1645	530-300000				
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED OF PLEASE NOTE: Unless an assignee is identified below, no assignee recordation as set forth in 37 CFR 3.11. Completion of this form is a completion of this form.			HE PATENT (print or type)  data will appear on the patent. If an assignee is identified below, the document has been filed for a substitute for filing an assignment 03/10/2006 MBEYENE2 00000034 10774602  ) RESIDENCE: (CITY and STATE OR COUNTRY)  U1 FU: 1501  Paris, FRANCE  02 FC: 1504  300.00 OP				
Please check the appropriate	e assignee category or catego	ries (will not be printe	ed on the patent):	☐ Individual   Co	orporation or other private gr	oup entity Government	
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